

Attorney Docket No.: YOUZ 2 00116

**DECLARATION AND POWER OF ATTORNEY  
FOR UTILITY OR DESIGN PATENT APPLICATION  
(37 CFR 1.63)**

As a below inventor, I hereby declare that:

My residence, mailing address and citizenship are as stated below next to my name.

I believe I am an original, first and sole inventor (if a single name listed below) or an original, first and joint inventor (if plural names listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**USE OF XENON WITH HYPOTHERMIA FOR TREATING NEONATAL ASPHYXIA**

the specification of which

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☐

is attached hereto

was filed on \_\_\_\_\_ as United States Application Number \_\_\_\_\_ (or PCT International Application Number \_\_\_\_\_) and was amended on \_\_\_\_\_ (if applicable).

I hereby authorize and request my attorney to insert the application number and filing date, when known, into this declaration executed by me for this invention.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. § 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent or inventor's certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application(s) for patent or inventor's certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed:

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Claimed ?	Certified Copy Attached?
GB 0323861.5	Great Britain	10/10/2003	Yes	
GB 0418539.3	Great Britain	08/19/2004	Yes	

I hereby claim the benefit under 35 U.S.C. 119(e) of United States provisional application(s) listed below.

Application Number(s)	Day/Month/Year Filed	Additional Provisional Application Numbers Listed on Supplemental Priority Data Sheet Attached

I hereby claim the benefit under Title 35, United States, § 120 of any United States application(s) or any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application or PCT International application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information which is material to patentability as defined in Title 37, of Federal Regulations Code, § 1.56(a) which became available between the filing date of the prior application and the national or PCT international filing date of this application:

U.S. Parent Application or PCT Parent Number	Parent Filing Date Day/Month/Year Filed	Parent Patent Number (if applicable)
PCT/GB2004/004298	11/10/2004	

**POWER OF ATTORNEY:** As a named inventor, I hereby appoint the Attorneys associated with Customer No. 027885, to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both under 18 U.S.C. § 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

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